

Application and Contract for Online Industry Expert Theater

2021 ASCO Annual Meeting

Meeting Dates: June 4-8, 2021

Exhibit and Industry Expert Theater Dates: May 14-July 6, 2021

2021 ASCO
ANNUAL MEETING

Need Help? Contact ascoexhibits@spargo.com | 703-631-6200 | 800-564-4220

Application Deadline: Friday, March 12, 2021

Step 1: Contact Information

Submit Via Email

Exhibitor Name _____

Contact _____ Title _____

Phone _____ Email _____

Website _____ Address _____

City _____ State _____ Zip _____ Country _____

I would like to receive communication from ASCO and SPARGO, Inc. regarding exhibiting opportunities at current and future ASCO meetings. To opt out of receiving these messages at any time, contact compliance.expo@spargo.com.

Step 2: Program Information

Program Title _____

Presenter's Name(s) & Title (s) _____

Description of Presentation _____

Step 3: Program Fee and Preferred Dates and Times

\$55,000 per program for prerecorded session available on demand May 14-July 6

\$70,000 per program for live session or prerecorded session with live Q&A*

Please rank all 14 dates and times with 1 being your first choice. Live and prerecorded with live Q&A sessions only. Times listed are in Eastern Time.

Friday, June 4, 2021

___ 10:15 AM – 10:55 AM
___ 1:00 PM – 1:40 PM
___ 2:30 PM – 3:10 PM
___ 4:00 PM – 4:40 PM

Saturday, June 5, 2021

___ 10:30 AM – 11:10 AM
___ 1:30 PM – 2:10 PM
___ 3:00 PM – 3:40 PM

Sunday, June 6, 2021

___ 8:30 AM – 9:10 AM
___ 11:00 AM – 11:40 AM
___ 4:00 PM – 4:40 PM

Monday, June 7, 2021

___ 8:30 AM – 9:10 AM
___ 10:00 AM – 10:40 AM
___ 11:30 AM – 12:10 PM
___ 1:00 PM – 1:40 PM

These non-accredited educational sessions are up to 40-minutes including Q&A. The purpose of the session is to highlight a new service or the development of a product and should be focused on the science relating to the development of a product or service of the Theater Participant, not just the product or service itself. Theater presentations should feature one or more key **internal** scientific staff of the Theater Participant, not outside or third-party scientists or speakers, e.g. no Key Opinion Leaders. Theater presenters must be employees of the Theater Participant.

* Live sessions are limited and will be scheduled at a specific time in the program agenda. All sessions will be available on demand after the scheduled theater time unless Theater Participant gets pre-approval from ASCO.

Step 4: Payment Information

Total Amount Due: \$ _____

Mail check payment to:

ASCO Exposition Mgmt., c/o SPARGO, Inc.
11208 Waples Mill Road, Suite 112 • Fairfax, VA 22030

Credit Card Payment

An invoice will be sent within one business day with instructions to submit a credit card payment online. Credit cards will also be accepted by phone at 703-631-6200 or 800-564-4220.

100% payment is due with this application. Full payment is required to move forward with the IET. **Failure to make payments does not release the contracted or financial obligation of Exhibitor.**

Step 5: Cancellation Policy and Acknowledgement

No refund if Theater Participant cancels. Only contracted Exhibitors in good standing are eligible for participation in the Theater, therefore cancellation of exhibit space automatically results in cancellation of an Exhibitor's Theater(s). As an authorized representative of the above stated Exhibitor/Industry Expert Theater Participant, I have received, reviewed, and agree that Exhibitor will comply with the [Policies for Exhibitors and Other Organizations at ASCO Meetings](#) and the supplemental Industry Expert Theater Guidelines available on asco.org/exhibits and that Exhibitor will comply with all updates of such policies applicable to the 2021 ASCO Annual Meeting (as may be amended from time to time). Exhibitor agrees to receive all written and electronic correspondence from ASCO, SPARGO, Inc., and official event contractors in reference to the 2021 and 2022 ASCO Annual Meeting. This application will become a contract upon Exhibitor's authorized signature and ASCO's acceptance and approval.

Exhibitor Signature _____ Date _____

Printed Name _____ Phone _____